

Facial Hematoma: An Atypical Bleeding Site for Acquired Hemophilia

Neeta Kesu Belani^{1,2} Winnie Z. Y. Teo^{1,2,3}

¹Fast and Chronic Program, Alexandra Hospital, National University Health System Singapore, Singapore

²Yong Loo Lin School of Medicine, National University of Singapore, Singapore

³Department of Haematology-Oncology, National University Cancer Institute Singapore (NCIS), National University Health System Singapore, Singapore

Hamostaseologie

A 79-year-old lady with diabetes and advanced Alzheimer's dementia presented with a sudden, spontaneous swelling over her left cheek. She was not on antiplatelets, anticoagulation, or traditional remedies.

Investigations revealed prolonged activated partial thromboplastin time of 76 seconds (23.9–32.2 seconds), uncorrected with mixing (47.8 seconds; control: 27.9 seconds), undetectable factor VIII levels (<1%), and increased factor VIII inhibitors (240 BU). Renal profile, liver profile, autoimmune workup, blood film, and other bleeding markers were normal. Imaging revealed a right breast nodule and concentric thickening of the rectum. No further investigations were pursued as comfort was being prioritized.

The patient was given blood transfusions, factor VIII inhibitor bypass activity (FEIBA), and immunosuppression. She responded well after three cycles of rituximab with no further bleeding, bruising, or drop in hemoglobin levels (→Figs. 1–3).

Further history revealed multiple easy bruising; most significant initially in her left arm, 5 days after third dose



Fig. 1 Front view of facial hematoma.



Fig. 2 Side view of facial hematoma.

of coronavirus disease 2019 (COVID-19) vaccination which was treated conservatively as senile purpura. Two months later, she developed spontaneous worsening facial hematoma. It is unclear if this was due to COVID-19 vaccination as



Fig. 3 Previous episode of spontaneous bleeding into left arm.

received

February 1, 2024

accepted after revision

February 22, 2024

© 2024. Thieme. All rights reserved.

Georg Thieme Verlag KG,

Rüdigerstraße 14,

70469 Stuttgart, Germany

DOI <https://doi.org/10.1055/a-2276-4893>.

10.1055/a-2276-4893.

ISSN 0720-9355.

we could not establish temporal association.¹ Hematoma in the face is an atypical presentation of acquired hemophilia. Differentials include trauma, tumors, vessel malformations, or abscesses.^{2,3} In elderly with severe bruising, atypical hematoma with a significant decrease in hemoglobin levels should be investigated promptly and acquired hemophilia should be considered in this group.⁴

Informed Consent

Patient consented.

Financial Disclosure

The authors declare that this study received no financial support.

Conflict of Interest

The authors declare that they have no conflict of interest.

References

- 1 Sekulovski M, Mileva N, Vasilev GV, et al. Blood coagulation and thrombotic disorders following SARS-CoV-2 infection and COVID-19 vaccination. *Biomedicines* 2023;11(10):2813
- 2 Sirine A, Boutheina H, Youssef H, et al. Maxillary Sinus Epidermoid Cyst: A Case Report. *Ear, Nose & Throat Journal. Ear Nose Throat J* 2023;0(0). Doi: 10.1177/01455613231207230
- 3 Zhao C, Jin L, Tan Y, et al. Case Report: multiple gastrointestinal stromal tumors along with numerous cutaneous neurofibromas: a case description and literature analysis. *Front Oncol* 2023;13:1206991
- 4 Marino R. Acquired hemophilia A: bleeding pattern and hemostatic therapeutic strategies. *Medicina (Kaunas)* 2023;59(10):1739